

Minutes of the Meeting of the MICs Board of Directors
Wednesday, September 25, 2024 – 18h00 Hours
via Teams (LMH Lead Site)

ANSON GENERAL HOSPITAL	
x	Danielle Delaurier – Chair
x	Ann Zsigmond – Vice-Chair
x	Fern Morrissette – Treasurer
x	Ben Lefebvre – Municipal Representative
BINGHAM MEMORIAL HOSPITAL	
x	Oswald Silverson – Chair
	Vacant – Vice-Chair
	Vacant – Treasurer
	Vacant – Municipal Representative
LADY MINTO HOSPITAL	
x	Denis Clement – Chair
x	Pierre Demers – Vice-Chair
x	Vacant – Treasurer
x	Sylvie Charron-Lemieux – Municipal Representative
MICs GROUP OF HEALTH SERVICES	
x	Paul Chatelain – MICs Chief Executive Officer
x	Isabelle Boucher – MICs Chief Nursing Officer
x	Dr. Joey Tremblay – MICs Chief of Staff
x	Dr. Auri Bruno-Petrina – MICs President of Medical Staff
GUESTS	
x	Tiffany Smith – MICs Executive Assistant (<i>Recording Secretary</i>)
x	Derek Wilson – MICs Chief Financial Officer
x	Gail Waghorn – BMH Board Applicant
x	Pierre Demers – LMH Board Applicant

1.0 Call to Order & Chairs Remarks (D. Clement) 21:58

1.1 Land Acknowledgement: We would like to acknowledge that we are hosting this meeting from the traditional territory of the Cree, Ojibwe, Ojicree, Algonquin and Métis Peoples of Apitipi Anicinapek Nation and Taykwa Tagamou First Nation, located in Treaty 9 Territory. Miigwetch to all Indigenous and Métis partners for sharing their land with us.

1.2 Declaration of Conflicts

The chair opened the meeting and welcomed everyone. They then inquired if there were any declarations of conflict of interest. There were none.

2.0 Approval of Agenda (D. Clement)

The agenda was reviewed.

Add:

16.1 Motion to go In-Camera

16.2 Physician Hospital Privileges

16.3 Motion to come out of In-Camera

16.4 Approval of Hospital Privileges

Motion:

Moved by: B. Lefebvre

Seconded by: O. Silverson

Be it resolved,

THAT the MICs Board of Directors approve the board agenda as amended.

Carried.

3.0 Election of Directors of the Board**ELECTION OF BINGHAM MEMORIAL HOSPITAL VICE-CHAIR**

- Nomination of G. Waghorn was presented as recommended by the Nominating Committee.
- No further nominations were presented.
- G. Waghorn agreed to stand as Vice-Chair for the BMH Board.
- G. Waghorn was then declared Vice-Chair for the 2024/2025 fiscal year.

ELECTION OF LADY MINTO HOSPITAL VICE-CHAIR

- Nomination of P. Demers was presented as recommended by the Nominating Committee.
- No further nominations were presented.
- P. Demers agreed to stand as Vice-Chair for the LMH Board.
- P. Demers was then declared Vice-Chair for the 2024/2025 fiscal year.

Motion:

Moved by: B. Lefebvre

Seconded by: D. Delaurier

Be it resolved,

THAT the following be elected by acclamation to the MICs Board of Directors:

Gail Waghorn be elected to the BMH Board of Directors as Vice-Chair for a three-year term; Pierre Demers be elected to the LMH Board of Directors as Vice-Chair for a three-year term as recommended by the Nominating Committee as presented.

Carried.

New Board Members were invited to say a few words.

4.0 Trustee Education / Presentations

4.1 Trustee Education/Presentations

- The CEO provided an update on the progress of the ONE Initiative implementation.
- Project has been live since May 2024, and we are addressing any issues as quickly as possible.
- Board Members were invited to ask questions.

5.0 Approval of Minutes (D. Clement)

- 5.1 Minutes of the MICs Board of Directors meeting held June 26, 2024, were provided for information.

Motion:

Amend:

13.2 motions should read BMH instead of AGH.

13.3 motions should read LMH instead of AGH.

14.1 Elections of Lady Minto Hospital Treasurer to Lady Minto Hospital as stated as Anson General Hospital

Moved by: A. Zsigmond

Seconded by: F. Morrissette

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held June 26, 2024, as amended.

Carried.

6.0 Follow-Up Items

6.1 Review of the 2024-2025 Board Work Plan

- The 2024-2025 Board Work Plan will be reviewed.
- Board Education & Orientation Plan is attached for review. Orientation will take place in November.
- Critical Incidents Report will be provided today.
- The QIP and Corporate Scorecard are attached and will be reviewed today.
- OHA Board Assessment Tool has been ordered and will be distributed after the meeting.

7.0 MICs Finance

7.1 July 2024 Financial Statements – D. Wilson

- The CFO provided an update on the current cash flow statement.
- The July 2024 Financial Statements were reviewed.

BMH

- BMH is operating at a deficit of \$(523,627) at the end of July 2024
- Total Operating Revenue = \$ 3,223,919
- Total Operating Expenses = \$ 3,747,546
- Agency nurse expenses remain high.

AGH

- AGH is operating at a deficit of \$(482,634) at the end of July 2024
- Total Operating Revenue = \$ 4,544,613
- Total Operating Expenses = \$ 5,027,247
- Total Deficit before SCM = \$(609,811)
- Agency nurse pressure remains high

SCM

- SCM is operating at a deficit of \$(218,520) at the end of July 2024
- Total Operating Revenue = \$ 2,763,310
- Total Operating Expenses = \$ 2,981,830

LMH

- LMH is operating at a deficit of \$(309,276) at the end of July 2024
- Total Operating Revenue = \$ 6,680,355
- Total Operating Expenses = \$ 6,989,631

VM

- VM is operating at a surplus of \$77,198 at the end of July 2024
- Total Operating Revenue = \$ 1,456,939
- Total Operating Expenses = \$ 1,379,741
- Board Members were invited to ask questions.

New Funding

- We are receiving approximately 70% of cost for Bill 124 under base funding
- Base funding increased by 6% between the Northern Stabilization Fund and the across the board small and specialty psych hospital increase. increases in northern stability account built into our base funding.
- Q1 forecast has been submitted.

Motion: to approve the July 2024 Financial Statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto.

Moved by: G. Waghorn

Seconded by: P. Demers

Be it resolved,

THAT the MICs Board of Directors approve the July 2024 Operating Statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

7.2 Capital Building Projects Update – D. Wilson

- The CFO provided an update on the status of the capital projects.
- Board Members were invited to ask questions.

7.3 OFA Loan for Meditech Expanse – D. Wilson

- The CFO provided an update on the financial position of the Implementation of Meditech Expanse. Reviewed the TaDH proposal to secure a loan through the OFA.

Motion: for the Board of Directors to support the initiative of the district in attaining a loan driven by TaDH and Partners with the Ontario Financing Authority (OFA) related to the capital purchase of the Meditech Expanse.

Moved by: P. Demers

Seconded by: F. Morrissette

Be it resolved,

THAT, the MICs Board of Directors approve to support the initiative of the district in attaining a loan driven by TaDH and Partners with the Ontario Financing Authority (OFA) related to the capital purchase of the Meditech Expanse.

8.0 Presentations/Reports (D. Clement)

8.1 Chief Executive Officer Report: (P. Chatelain)

- We have signed the Development Agreement for SCM but are just waiting for the Minister to sign. We have gone to pre-qualifications for contractors and will go out to tender in early October. The interest rates continue to fall, which helps reduce our shortfall. The deadline to be shovel-ready is November 30, 2024. The shortfall is approximately less than \$10M. Even when we receive an executed signed development agreement, approval to construct is the “green light” milestone and will occur once the tenders come back.
- We are still waiting to hear on our application to extend our bed license for SCM. The current expiry is June 2025.
- The AGH and BMH Automatic Transfer Switch continues. The Pharmacy Upgrade Stage 2 is now in progress.
- We have updated our CT scanner proposal to reflect up to date pricing on renovations, etc., and are still waiting approval.
- Dr. Brenda Burns has signed a 6-month contract with BMH to provide ER services beginning in October 2024. She is replacing Dr. Gray who is taking a leave.
- Dr. Mona Mohammed is also beginning her primary care practice at the end of the September at the Cochrane Family Health Team.
- We have our Board Retreat scheduled at the Iroquois Falls Legion on November 16, 2024. We are looking to confirm the OHA as a special guest. Please reach out to Tiffany on other topics you wish to discuss as we are close to finalizing the agenda
- Board Members were invited to ask questions.

8.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO provided a report on the following items:
 - **Staffing** – LMH has one RN and one RPN position that remains vacant and is relying on Agency staff to cover. AGH hired a PT RPN and FT IEN RN in July, but still has an RN shortage and is relying on Agency staff to cover. BMH hired two RNs and remains with two RN vacancies using Agency staff to cover.
 - **Occupancy** – LMH remains consistent with 20-22 inpatients. The number of AGH inpatients remains low but see a rise in ER visits. BMH census remains low, ALC patients are less than five.
 - **Quality Improvement/construction projects** – LMH continues to work on the plans for the inpatient unit and the ER P4R project. Working towards creating a storage room to improve the Oncology patient treatment area. AGH continues to work on the Wellness Room utilizing funds provided by the Auxiliary, the ER P4R project plan is underway. BMH is focusing on decreasing the barriers to discharge to ensure a successful care continuum that will reduce re-admissions. We are awaiting approval for P4R funding.
 - **Oncology Department** – LMH site visit scheduled for September.

- **Surgical Program** – LMH Surgical Program is currently operating with a skeleton staff, consisting of just two RNs and two RPNs. There have been, and will likely continue to be, additional gaps in nursing coverage. The Endoscopy Program at AGH remains on hold.
- **Medical Devices Reprocessing** – staffing for absences is challenging as replacement staff have full-time positions.
- **Specialty Clinics** – Dr. Verbeek continues to offer services at AGH.
- **Education/staff development** – LMH staffing shortages are preventing staff from attending educational opportunities. AGH is offering ER education through RBC donation and ED Nursing Education, Retention and Workforce Program funding and was approved to recruit 5 nurses through the Community Commitment Program for Nurses (CCPN) offered by Ontario Health which provides up a \$25,000 signing bonus per eligible nurse. AGH has also signed with the Canadian Association of Schools of Nursing to participate in the IEN Mentorship Program funded by Health Canada to address the retention and integration of IENs into the Canadian workforce by reducing transition stress and culture shock; mentorship training to start in September and IEN training in January 2025. BMH has upcoming Nonviolent Crisis Intervention and GPA training sessions.
- **Pharmacy Services** – Phase II of the pharmacy upgrade at LMH is underway and expected to be completed by October 2024. Working towards barcoding of all antibiotics and narcotics for One Expanse. The annual OCP audit was postponed due to renovations. On-site visits to AGH and BMH are scheduled for September 11th and October 29th for LMH. Policies are being updated to align with Expanse.
- **Hospice Services** – in addition to regular base funding, one-time funding was received for 2024/25. For Grief and Bereavement Services, \$12,500 was allocated for 2023/24, with \$50,000 set for 2024/25. During 2023/24, hospice services were accessed by 16 patients at LMH, 19 patients at AGH and 11 at BMH. In Q1 of 2024/25, five patients were admitted to hospice at LMH, six patients at AGH and two at BMH indicating continued utilization across the sites.
- **Care Transitions**-In Q1, 26 referrals came from LMH, 63 from AGH, and 15 from BMH. The Ministry released its Home First directive in August 2024, emphasizing the need to reduce hospital patients designated as Alternate Level of Care (ALC) and aiming to cut ALC volumes by 10% by September 2024. Despite this push, hospitals are struggling with this shift. Lack of accessible housing remains a significant barrier to patient discharge. Post-discharge follow-up calls to eligible patients are helping to lower emergency department visits, re-admissions and adverse events.
- **Infection Prevention and Control (IPAC)** – In Q1 2024, we had 3 outbreaks. LMH with a COVID-19 outbreak which affected patients. VM's Human Metapneumovirus outbreak affected 19 residents. SCM's Parainfluenza outbreak affected six residents. We had a total of 3 outbreaks in Q2, AGH with a COVID-19 outbreak that affected three patients, LMH's COVID-19 outbreak affected 10 patients while VM's COVID-19 outbreak affected 16 residents. IPAC is working on Quality improvements by updating policy IPC-507 to include the latest Mpx investigation too from Public Health Ontario and updating the COVID-19 policies based on PHO masking technical brief, N95 masks are no longer required for suspected or confirmed COVID-19 cases; the policies now require surgical masks. Precautions changed from Airborne to Droplet/Contact precautions, but

N95 masks remain available for team members if needed. As of July 2024, baseline data collection on patient catheter days has begun to track CAUTI rates.

- **Meditech Expanse Project/Change Management/Clinical Informatics** – Meditech Expanse was launched on May 14th with a command center and team of department leads and super users to provide immediate support. The command center operated for two weeks, during which it handled the highest volume of calls and support requests. Physician support has been a key concern with the new Expanse system, as they now must enter orders and complete documentation mainly in Meditech. Health Tech provided phone and remote support during the launch, which was extended to three weeks. After that, Clinical Informatics and Change Management Leads handled support. Physicians have been the main group requiring support. Training/orientation to Expanse, testing and resolving issues will remain ongoing. Policies are being reviewed and revised to reflect the new processes with the implementation of Expanse.

9.0 Medical Staff (Dr. J. Tremblay)

9.1 Chief of Staff Report:

- MICs Chief of Staff provided the following report.
 - Emergency Department
 - ERs remained open throughout the summer and averted any ER closures.
 - LMH requires minimal locum support at this time. A new physician starting at LMH.
 - AGH continues to be supported by EDLP, Dr. Dehkordi will be starting to fill his six ER shifts, while managing his family practice. One more physician for AGH would be ideal.
 - BMH came close to closure once throughout the summer but managed to find a physician to cover. One more physician would be ideal.
 - Recruitment remains on the forefront and traffic is at its highest.
 - Temporary Locum Program Stipend has been extended to March 31, 2025.
 - ONE Expanse
 - Ongoing issues, speeds are almost back to baseline efficiency; unstable patients require in-depth charting and entries in Expanse.
- Board Members were invited to ask questions.

10.0 Ontario Health North / MOHLTC Business (I. Boucher)

10.1 Inspection Report (SCM)

- The public Inspection Report for SCM was provided for information.
- Protocols used were Medication Management and Infection Control resulting in no findings of non-compliance.
- Medication Management education has been provided for all staff members and an increase in Audits are being conducted.
- Board Members were invited to ask questions.

11.0 MICs Quality Committee (I. Boucher)**11.1 Critical Incidents Report**

- Critical Incidents Report was provided for information. The report captures critical incidents for a one-year period in both a hospital and Long-Term Care setting. Most common critical incidents are falls, resulting in falls 406, and safety/security resulting in 104 incidents.
- We will be transitioning to the Expanse QRM module.
- Board Members were invited to ask questions.

11.2 QIP and Corporate Scorecard

- QIP and Corporate Scorecard was provided for information. Continuing to work on quality indicators that are in line with our QIP. Performing very well for Q1.
- Will review the survey handout procedure to try to increase the response rates.
- Board Members were invited to ask questions.

12.0 Physician & HR Recruitment (P. Chatelain)**12.1 Boreal Pulse Update**

- Will be scheduling a special Board meeting and invite Boreal Pulse to deliver a presentation.

12.2 Recruitment Fair

- Boreal Pulse Physician Recruiter's reports were provided for information.
- The job description for the Physician Administrative Assistant position is still in progress.

13.0 Indigenous and French Language Issues (D. Clement)**13.1 N/A****14.0 Site Business (D. Clement)****14.1 Anson General Hospital:****14.11 SCM Redevelopment Project**

- Covered under 7.1

14.12 IFSS Thank You Card

- Thank you card from Iroquois Falls Secondary School shared with the Board.
- Bursary recipients are posted in the July newsletter.

14.2 Bingham Memorial Hospital:**14.21 N/A****14.3 Lady Minto Hospital:****14.31 ESCHS Thank You Card**

- Thank you card from École Secondaire Cochrane High School was shared with the Board
- Bursary recipients are posted in the July newsletter.

15.0 Partnership Business (D. Clement)15.1 Jun. 2024 Board Effectiveness Survey Results

- 9 out of 13 surveys were submitted.

15.2 Sept. Board Effectiveness Survey

- The survey was emailed to the Board Members following the meeting.

16.0 In-Camera16.1 Motion to go in-camera

Moved by: B. Lefebvre

Seconded by: P. Demers

16.2 Medical Staff Hospital Privileges16.3 Motion to come out of in-camera

Moved by: D. Clement

Seconded by: D. Delaurier

16.4 Approval of Hospital Privileges

Motion: to approve hospital privileges for Dr. Terry Skoretz, Dr. Brenda Burns and Dr. Agnes Sobiesiak, as locum tenens in the Critical Care/Emergency Department category as recommended by the Medical Advisory Committee

Moved by: A. Zsigmond

Seconded by: P. Demers

Be it resolved,

THAT the MICs Board of Directors approve hospital privileges for Dr. Terry Skoretz, Dr. Brenda Burns and Dr. Agnes Sobiesiak, as locum tenens in the Critical Care/Emergency Department category as recommended by the Medical Advisory Committee.

Carried.

17.0 MICs News (D. Clement)

- Jul., Aug., and Sept. 2024 MICs Newsletters were provided for information.

18.0 Next Meeting Date (D. Clement)

- Wednesday, October 23, 2024, at 6:00 p.m. (AGH Lead Site)

19.0 Upcoming Meeting Dates

- Updated meeting scheduled provided.

20.0 Adjournment (D. Clement)

- There being no further business, the meeting adjourned at 8:01 p.m.
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CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO